



## APPENDIX 2: POPULATION DEMOGRAPHICS IN THE 20 PULSE CHECK SITES

	<i>Pulse Check Site</i>	<i>MSA Size* (S,M,L,X)<sup>a</sup></i>	<i>Race Percent<sup>a</sup></i>				<i>Percent Hispanic</i>	<i>Violent Crime/100,000 Popu-lation<sup>b</sup></i>	<i>Percent Persons Under 18 Below Pov-erty Level<sup>a</sup></i>	<i>Unem-employment Rate<sup>a</sup></i>	<i>Popula-tion Density/Square KM<sup>c</sup></i>	<i>Percent Urban<sup>a</sup></i>	<i>Percent Rural<sup>a</sup></i>
			<i>White</i>	<i>Black</i>	<i>American Indian/Alaska Native</i>	<i>Asian/Pacific Islander</i>							
Northeast	Boston, MA-NH PMSA	L	82.5	6.8	0.2	4.9	5.9	505	2.3	3.3	353.3	96.3	3.7
	New York, NY PMSA	X	48.8	24.4	0.4	9.2	25.1	1,037	6.7	6.1	2,931.6	99.4	0.6
	Philadelphia, PA-NJ PMSA	X	72.2	20.0	0.2	3.4	5.0	667	3.8	4.6	495.7	94.8	5.2
	Portland, ME	S	96.0	0.9	0.4	1.2	0.8	730	2.3	2.9	368.7	68.2	31.8
South	Baltimore, MD PMSA	L	67.4	27.2	0.3	2.7	2.0	581	3.2	3.8	110.9	90.4	9.6
	Columbia, SC	M	63.9	32.0	0.4	1.5	2.5	868	3.9	4.1	136.8	78.8	21.2
	El Paso, TX	M	74.1	3.0	0.7	1.1	78.3	668	10.2	6.2	267.5	97.0	3.0
	Memphis, TN	L	52.9	43.2	0.2	1.5	2.3	1,081	6.3	4.8	141.9	87.9	12.1
	Miami, FL PMSA	L	69.7	20.1	0.2	1.4	57.3	1,532	5.8	6.0	432.0	99.3	0.7
	New Orleans, LA	L	57.3	37.4	0.4	2.1	4.4	918	7.1	4.9	148.2	93.5	6.5
	Washington, DC-MD-VA-WV PMSA	L	60.0	25.9	0.3	6.7	8.7	537	2.3	3.4	281.1	90.4	9.6
Midwest	Chicago, IL PMSA	X	65.8	18.8	0.2	4.7	17.1	NA	3.9	4.7	610.5	98.1	1.9
	Detroit, MI PMSA	L	71.2	22.8	0.4	2.3	2.9	870	4.0	4.4	433.3	93.6	6.4
	Sioux Falls, SD	S	93.5	1.3	1.8	1.0	1.9	252	2.3	2.4	45.8	87.9	12.1
	St. Louis, MO	L	78.3	18.2	0.3	1.4	1.5	NA	3.7	4.2	155.2	78.3	21.7
West	Billings, MT	S	93.0	0.4	3.1	0.6	3.7	187	3.9	3.5	18.6	83.3	16.7
	Denver, CO PMSA	L	79.3	5.4	0.9	3.0	18.8	385	2.6	3.2	203.2	96.0	4.0
	Honolulu, HI	M	21.2	2.2	0.2	55.0	6.7	268	3.1	4.3	556.4	98.4	1.6
	Los Angeles-Long Beach, CA PMSA	X	48.6	9.6	0.7	12.2	44.6	1,027	6.8	5.9	887.3	99.3	0.7
	Seattle-Bellevue-Everett, WA PMSA	L	78.4	4.3	1.0	9.8	5.2	419	2.2	3.6	203.7	93.1	6.9

\*Small = <300,000 persons; Medium = 300,000–1 million persons; Large = 1 million–5 million persons; Extra Large = >5 million persons

<sup>a</sup>Source: 2000 U.S. Census, 2000 data

<sup>b</sup>Source: 2001 County and City Extra: Annual Metro, City, and County Data Book, Tenth Edition. Eds: Gaquin, D.A., and Littman, M.S. Washington, DC: Berman Press, 1998 data

<sup>c</sup>Source: 2001 County and City Extra: Annual Metro, City, and County Data Book, Tenth Edition. Eds: Gaquin, D.A., and Littman, M.S. Washington, DC: Berman Press, 1999 data

## APPENDIX 3: NATIONAL-LEVEL DATA SOURCES AVAILABLE IN THE 20 PULSE CHECK SITES

	<i>Pulse Check Site</i>	<i>HIDTA<sup>1</sup> State</i>	<i>CEWG<sup>2</sup></i>	<i>DAWN<sup>3</sup></i>	<i>ADAM<sup>4</sup></i>
Northeast	Boston, MA	✓	✓	✓	
	New York, NY	✓	✓	✓	✓
	Philadelphia, PA	✓	✓	✓	✓
	Portland, ME	✓			
South	Baltimore, MD	✓	✓	✓	
	Columbia, SC				
	El Paso, TX	✓	✓		
	Memphis, TN	✓			
	Miami, FL	✓	✓	✓	✓
	New Orleans, LA	✓	✓	✓	✓
	Washington, DC	✓	✓	✓	✓
Midwest	Chicago, IL	✓	✓	✓	✓
	Detroit, MI	✓	✓	✓	✓
	Sioux Falls, SD	✓			
	St. Louis, MO	✓	✓	✓	
West	Billings, MT				
	Denver, CO	✓	✓	✓	✓
	Los Angeles, CA	✓	✓	✓	✓
	Honolulu, HI	✓	✓		✓
	Seattle, WA	✓	✓	✓	✓

<sup>1</sup>High Intensity Drug Trafficking Area of the Drug Enforcement Administration (DEA)

<sup>2</sup>Community Epidemiology Work Group of the National Institute on Drug Abuse (NIDA)

<sup>3</sup>Drug Abuse Warning Network of the Substance Abuse and Mental Health Services Administration (SAMHSA)

<sup>4</sup>Arrestee Drug Abuse Monitoring program of the National Institute of Justice (NIJ)

Note: Shaded boxes indicate that selected city is in a rural State.



## APPENDIX 4: PULSE CHECK SOURCES

<b>Pulse Check Site</b>	<b>Epidemiology/Ethnography</b>	<b>Law Enforcement</b>
Baltimore, MD	<b>James Peterson</b> Johns Hopkins University School of Public Health	<b>Robert J. Penland</b> Washington-Baltimore HIDTA
Billings, MT	<b>Ernesto Randolfi, Ph.D.</b> Montana State University at Billings Department of Health and Physical Education and Human Services	<b>Scott Forshee</b> City/County Special Investigations Unit
Boston, MA	<b>George Arlos</b> Organization prefers anonymity	<b>Lieutenant Francis W. Armstrong, Jr.</b> Boston Police Department Drug Control Division
Chicago, IL	<b>Larry Ouellet, Ph.D.</b> EPI/BIO COIP School of Public Health	<b>Individual prefers anonymity</b> Chicago Police Department Organized Crime Division, Narcotic and Gang Investigations Section
Columbia, SC	<b>Individual prefers anonymity</b> Department of Alcohol and Other Drug Abuse Services	<b>C.O. Clark</b> Columbia Police Department Organized Crime and Narcotics Unit
Denver, CO	<b>Bruce D. Mendelson, M.P.A.</b> State Treatment Needs Assessment Contract Colorado Department of Human Services Alcohol and Drug Abuse Division	<b>Curt Williams and Rob McGregor</b> Denver Police Department Fugitive Location and Apprehension Group
Detroit, MI	<b>Richard F. Calkins</b> Michigan Department of Community Health Division of Quality Management and Planning	<b>Individual prefers anonymity</b> Southeast Michigan HIDTA
El Paso, TX	<b>Tessa Hill, M.A.</b> Aliviane, Inc.	<b>Jeff Cole</b> Organization prefers anonymity
Honolulu, HI	<b>D. William Wood, Ph.D., M.P.H.</b> University of Hawaii Department of Sociology	<b>Lieutenant Mike Moses</b> Honolulu Police Department Narcotics, Vice Division
Los Angeles, CA	<b>Beth Finnerty, M.P.H.</b> University of California, Los Angeles Integrated Substance Abuse Programs (ISAP)	<b>Eric Lillo</b> Los Angeles Police Department
Memphis, TN	<b>Randolph Dupont, Ph.D.</b> Department of Psychiatry University of Tennessee	<b>Fred Romero</b> Memphis Police Department Vice Narcotics Unit
Miami, FL	<b>James N. Hall</b> Up Front Drug Information Center	<b>Prefers anonymity</b>
New Orleans, LA	<b>Gail Thornton-Collins</b> New Orleans Health Department	<b>Lieutenant Reginald Jacque</b> New Orleans Police Department Narcotics Major Case Section
New York, NY	<b>John A. Galea, M.A.</b> New York State Office of Alcoholism and Substance Abuse Services Street Studies Unit	<b>Individual prefers anonymity</b> Drug Enforcement Administration New York Division Unified Intelligence (S-13)
Philadelphia, PA	<b>Samuel J. Cutler</b> Philadelphia Behavioral Health System Coordinating Office for Drug and Alcohol Abuse Programs	<b>Ken Bergmann</b> Organization prefers anonymity
Portland, ME	<b>Nate Nickerson, R.N., M.S.N.</b> Public Health Division, Department of Health and Human Services City of Portland	<b>George Connick</b> Maine Drug Enforcement Administration
Seattle, WA	<b>Thomas R. Jackson, M.S.W.</b> Evergreen Treatment Services	<b>Steve Freng</b> High Intensity Drug Trafficking Area
Sioux Falls, SD	<b>Darcy Jensen</b> Prairie View Prevention Services	<b>Jerry Mundt</b> Sioux Falls Police Department Narcotics Division
St. Louis, MO	<b>James M. Topolski, Ph.D.</b> Missouri Institute of Mental Health	<b>Detective Leo Rice</b> St. Louis Police Department Narcotics Division
Washington, DC	<b>Jerry Brown</b> Department of Health HIV/AIDS Administration	<b>Sergeant John Brennan</b> Washington, D.C. Police Department Major Narcotics



<b>Pulse Check Site</b>	<b>Non-Methadone Treatment</b>	<b>Methadone Treatment</b>
Baltimore, MD	<b>Adrienne Britton-Robinson, BA, CAC</b> Total Health Care	<b>Cindy Shaw</b> Institute for Behavior Resources (IBR Reach)
Billings, MT	<b>Mona Sumner</b> Rimrock Foundation  <b>Rhonda Stenner</b> South Central Mental Health Center Journey Recovery Program	<b>(Illegal in the State of Montana)</b>
Boston, MA	<b>Jim Sweeney</b> Gavin House	<b>Lawrence O'Toole</b> Habit Management
Chicago, IL	<b>Nick Gantes</b> Gateway Foundation	<b>Individual prefers anonymity</b> Cornell Interventions
Columbia, SD	<b>Laura Truesdale</b> Palmetta Baptist Medical Center Outpatient Behavioral Health Services	<b>Jim Van Frank</b> Columbia Metro Treatment Center
Denver, CO	<b>Tim McCarthy</b> Arapahoe House	<b>Pamela J. Manuele, RN, BSN, ANPC, CCJS</b> Comprehensive Addiction Treatment Services
Detroit, MI	<b>Peter Mason</b> Renaissance West Community Health Services	<b>Octavius Sapp, C.A.C.</b> City of Detroit, Department of Human Services Drug Treatment Program
El Paso, TX	<b>Armando Salas</b> Aliviane Men's Residential Facility	<b>Julie Renteria, L.V.N.</b> El Paso Methadone Maintenance and Detox Treatment Center
Honolulu, HI	<b>Prefers anonymity</b>	<b>Lorianne Bean</b> <b>Lisa Cook</b> <b>Marcia Tsuehoriuchi</b> Drug Addiction Services of Hawaii
Los Angeles, CA	<b>Mari Radzik, Ph.D.</b> Substance Abuse Treatment Program Division of Adolescent Medicine Children's Hospital of Los Angeles	<b>Individual prefers anonymity</b> Aegis Medical System
Memphis, TN	<b>Bonnie Moody, LCSW</b> Community Behavioral Health Center	<b>Rusty Titsworth</b> Memphis Center for Research and Addiction Treatment
Miami, FL	<b>Michael Miller, Ph.D.</b> The Village South, Inc. Addiction Treatment Center	<b>Prefers anonymity</b>
New Orleans, LA	<b>Eleanor Glapion</b> New Orleans Substance Abuse Clinic	<b>Nonrespondent</b>
New York, NY	<b>Prefers anonymity</b>	<b>Individual prefers anonymity</b> Lower Eastside Service Center
Philadelphia, PA	<b>Chris Sweeney</b> Northeast Treatment	<b>Prefers anonymity</b>
Portland, ME	<b>Stephen Leary</b> Milestone Foundation, Inc.	<b>Marty O'Brien</b> Discovery House Maine
Seattle, WA	<b>Ramona Graham</b> Center for Human Services	<b>Victoria Evans</b> Therapeutic Health Services
Sioux Falls, SD	<b>Nicole McMillin</b> Volunteers of America Dakotas	<b>(Illegal in the State on South Dakota)</b>
St. Louis, Missouri	<b>Nonrespondent</b> <b>Mike Morrison</b> Bridgeway Counseling	<b>Cheryl Gardine</b> DART
Washington, D.C.	<b>James Shepard</b> Organization prefers anonymity	<b>LaTonya Sullivan</b> Organization prefers anonymity



## APPENDIX 5: DISCUSSION AREAS

### APPENDIX 5: DISCUSSION AREAS BY SOURCE TYPE\*

Topic	L	E	M	N
<b>SPECIAL SECTION: A LOOK AT LOCAL DRUG MARKETS</b>				
How difficult is it for users/undercover police to buy specific drugs?**	✓	✓		
During this reporting period, has there been a time when users could not buy specific drugs? If yes, when and why?	✓	✓		
Is there any particular day, week, or month that local drug markets seem more active? If yes, when? To what do you attribute this phenomenon?	✓	✓		
Where do users buy their drugs most of the time?	✓	✓		
Which specific neighborhood(s) in your city has the greatest concentration of drug sales?	✓	✓		
What else, besides cash, do users trade or exchange for drugs?	✓			
What else, besides cash, do dealers accept in exchange for drugs?		✓		
What has, in the past, deterred street buys of any particular drug? In your opinion, what would, in the future, deter such buys?	✓	✓		
List and describe any recent targeted law enforcement or legislative policy directives or initiatives. How did it impact on your community's overall drug abuse problem, either for better or worse?	✓	✓		
What gaps or challenges, if any, do you perceive in your community's current law enforcement efforts?		✓		
What are any recent developments or trends in your State, in areas beyond your city, that could eventually affect your city's drug abuse problem—either for better or worse—in the future?	✓	✓		
How do street-level drug dealers communicate with their fellow street dealers? With their suppliers? With their buyers?	✓			
How do dealers transport drugs to their selling locations?	✓			
To the best of your knowledge, what happens to the cash collected by street-level dealers?	✓			
Do you have any suggestions for ways to disrupt local drug market activity?	✓			
<b>THE SNAPSHOT</b>				
How serious is the current illegal drug problem in your community?	✓	✓	✓	✓
How has the illegal drug problem changed in your community?	✓	✓	✓	✓
<b>THE PERCEPTION</b>				
During the current and last reporting periods, what was the most widely abused drug in your community?	✓	✓	✓	✓
Second most widely abused drug? What drug was related to the most serious consequences?				
Second most serious consequences? Is any new problem drug appearing in your community?				
<b>THE DRUG**</b>				
How available is the drug in your community (for each drug, asks about various forms)?	✓	✓		
How has availability changed?	✓	✓		
What are the most common and second most common units of sale and corresponding standard units of the drug?	✓	✓		
What is the purity range for the drug during the current reporting period? During the last reporting period?	✓	✓		
What is the price range during the current reporting period? During the last reporting period?	✓	✓		
Are there any adulterants? If yes, please list and indicate if any are new this reporting period.	✓	✓	✓	✓
Why have price, purity, or adulterants changed or why have they remained stable?	✓	✓		
What is the source for your price, purity, and adulterant information?	✓	✓		
What are the street names, and are any of these new this reporting period?	✓	✓	✓	✓
What types of packaging are used, and are any of these new this reporting period?	✓	✓		
Are labels or brand names used? If yes, please list and indicate if any are new this reporting period.	✓	✓		
Have street names, packaging, or label/brand names changed since the last reporting period?	✓	✓		
How is the drug locally manufactured, processed, or grown?	✓	✓		
Have there been any changes in the local manufacturing process since the last reporting period? If yes, please describe.	✓	✓		
<b>THE SALE**</b>				
What is the predominant affiliation of local, street-level sellers?	✓	✓		
What is the predominant age range of local, street-level sellers?	✓	✓		
How likely are sellers to use their own drugs?	✓	✓		
In what types of other crimes are sellers involved?	✓	✓		
Have there been any changes in seller characteristics since the last reporting period? If yes, please describe.	✓	✓		
Are there any new sellers groups this reporting period? If yes, please describe.	✓	✓		
What is the geographical area where most street-level sales of the drug occur?	✓	✓		
Is the drug sold mostly indoors, outdoors, or evenly split between both?	✓	✓		
In what settings is the drug sold?	✓	✓		
How is the drug sold?	✓	✓		



THE SALE** (continued)	L	E	M	N
Are other drugs sold by this type of dealer? If yes, please list the drugs.	✓	✓		
Have any of the drugs sold with this drug changed since the last reporting period? If yes, please describe.	✓	✓		
Have any of the drug scene characteristics changed since the last reporting period? If yes, please describe.	✓	✓		

## THE USERS: Predominant characteristics\*\*

How did the number of users change since the last reporting period?	✓			
What is total number of primary users (of each drug) in your program? Total number of users (primary+ secondary+ tertiary) of each drug? How did these numbers change since the last reporting period?			✓	✓
What is the predominant age range of the drug users, and has it changed since the last reporting period?		✓	✓	✓
What is the predominant gender, and has it changed since the last reporting period?		✓	✓	✓
What is the predominant racial/ethnic group, and has it changed since the last reporting period? Is this group under-represented, overrepresented, or about equal compared with the general population in your area?		✓	✓	✓
What is the predominant socioeconomic position, and has it changed since the last reporting period?		✓	✓	✓
What is the most common geographical residence, and has it changed since the last reporting period?		✓	✓	✓
What is the predominant route of administration, and has it changed since the last reporting period?		✓	✓	✓
What are the drugs commonly taken with this drug? Are they taken sequentially, in combination with, or as a substitute for the drug? What are the street names for this combination or practice?		✓	✓	✓
Is the drug used mostly in public or in private?		✓	✓	✓
Is the drug used mostly alone or in groups/among friends?		✓	✓	✓
What are the common settings for the use of this drug?		✓	✓	✓
What is the most common referral source, and has it changed since the last reporting period?			✓	✓
What is the predominant education level, and has it changed since the last reporting period?			✓	✓
What is the most common frequency of use, and has it changed since the last reporting period?			✓	✓
What is the predominant employment status, and has it changed since the last reporting period?			✓	✓
What are the adverse consequences of marijuana abuse, and have they changed since the last reporting period?		✓	✓	✓

## THE USERS: New/emerging users\*\*

How did the number of new or emerging users change since the last reporting period? If increased, repeat the first 10 questions under "the users: predominant characteristics" for the new/emerging user group.		✓		
Among all clients in your program, and among first-time admissions, what is the total number of primary users (of each drug)? Total number of users (primary+ secondary+ tertiary) of each drug? How did these numbers change since the last reporting period? For the first-time admission group, if increased, repeat all questions under "the users: predominant characteristics."			✓	✓

## METHADONE DIVERSION/TREATMENT

What is the availability of methadone treatment in your community?		✓		
How has treatment availability changed since the last reporting period?		✓		
What is the capacity of public methadone treatment? Private methadone treatment?		✓		
How has the capacity of public methadone treatment changed since the last reporting period? Private methadone treatment?		✓		

## COMMUNITY CONTEXTS

Have drug-related consequences (HIV/AIDS, hepatitis C, liver cirrhosis, drug-related automobile accidents, high-risk pregnancy, drug overdoses, alcohol DTs, tuberculosis, other) increased, decreased, or remained stable since the last reporting period? If changed, explain.			✓	✓
Have any psychiatric comorbidity diagnoses increased or decreased as a concern among your clients since the last reporting period?			✓	✓
Do any potential barriers (limited slot capacity, lack of trained staff to treat comorbid clients, violent behavior among presenting clients, age restrictions, other) prevent your program from serving all individuals who seek treatment? If yes, explain.			✓	✓

## TREATMENT BACKGROUND

What is your program's maximum capacity?			✓	✓
What is your current enrollment?			✓	✓
Does your program's clientele reflect the population of your local community? If no, please describe.			✓	✓

<sup>1</sup>Law enforcement<sup>2</sup>Epidemiologic/ethnographic<sup>3</sup>Methadone treatment<sup>4</sup>Non-methadone treatment<sup>5</sup>Please note that for the methadone and non-methadone treatment interviews, "community" was replaced with "program."<sup>6</sup>\*\*Respondents were asked about heroin, crack, powder cocaine, methamphetamine, marijuana, ecstasy, OxyContin<sup>®</sup>, and any other drugs (specify) for each of the discussion areas.



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